

RURAL DISTRICT OF DROXFORD

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND

SANITARY INSPECTOR

for the year

1950

PETERSFIELD:

THWAITES & WATTS, LAVANT STREET

RURAL DISTRICT OF DROXFORD

ANNUAL REPORT

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DROXFORD RURAL DISTRICT COUNCIL.

NORTHBROOK HOUSE,
BISHOP'S WALTHAM,
SOUTHAMPTON.

*To the Chairman and Members
of the Droxford Rural District Council.*

I have the honour to present the Annual Report for the year 1950 on the health and sanitary circumstances of the Rural District of Droxford.

The natural increase of births over deaths was 69 for the year under review.

The infant mortality almost equalled the lowest recorded figure for the District.

It is satisfactory to report that there has been no outbreak of infectious disease.

No case of diphtheria was notified during the year.

There have been no deaths from diphtheria since the Council's scheme for diphtheria immunisation by general practitioners was commenced in 1935.

It is encouraging to record that, in comparison with other Rural Districts, Droxford has an exceptionally high percentage of immunised children.

Parents are reminded that all children should be immunised before they are a year old and should receive their first "booster" preferably just before going to school.

The general arrangement of the Report has been preserved in order that it should serve also as a guide to the health services available for the district.

I should like to take this opportunity of thanking you all for your support and encouragement ; and I am grateful to the officers of other departments for their willing help and co-operation.

I also wish to express my grateful thanks to Mr. Lindley, the Chief Sanitary Inspector, and to Mr. Potter and Mr. Wenden, the Additional Sanitary Inspectors, for their valuable co-operation and assistance in compiling this Report.

S. Chalmers Parry.

Medical Officer of Health,
Droxford Rural District Council.

LEGISLATION.

During the year, the following legislation of Public Health significance was enacted :—

- (1) The Prevention of Damage by Pests Act, 1949.
- (2) The Shops Act, 1950.
- (3) The Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950.

The Prevention of Damage by Pests Act, 1949, which came into force on the 1st March, 1950, clearly defines the responsibilities and duties of occupiers, owners and local authorities with regard to rodent control.

The Shops Act, 1950, which came into force on 1st October, 1950, is a consolidation act and re-enacts the provisions of the earlier Shops Acts.

The Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, came into force on the 1st January, 1951. It repeals the provisions of the Food and Drugs Act, 1938, relating to Milk, Dairies and Artificial Cream, the whole of the Milk (Special Designations) Act, 1949, and part of the Food and Drugs (Milk and Dairies) Act, 1944.

The provisions relating to Milk, Dairies and Artificial Cream in these several acts are now re-enacted in a consolidated form.

During the year, the Council made Byelaws under Section 15 of the Food and Drugs Act, 1938, for securing the observance of sanitary and cleanly conditions and practices in connection with the handling, wrapping and delivery of food, and the sale of food in the open air. These Byelaws, which came into force on the 17th July, 1950, will be a valuable aid in attempts to raise the standard of food hygiene in the district.

The Public Health (Aircraft) Regulations, 1950, which came into force on the 1st February, 1950, provide for the application of sanitary control of airborne traffic between England and places outside the "accepted area" as defined in the regulations.

STATISTICS OF THE AREA.

Area	...	...	...	...	62,772
Population (Registrar General's estimate)					19,600
Number of inhabited houses (end of 1950)					
according to Rate Books			...		6,139
Rateable Value, 31st December, 1950	...				£125,557
Sum represented by a penny rate					£523 3s. 1d.

NATURAL AND SOCIAL CONDITIONS OF THE AREA.

Situated in the south-east corner of Hampshire, with the River Meon flowing from the north-east corner to the south-west corner, forming its most predominant geographical feature, the district contains several well-known residential villages which have changed little throughout the years.

Brick and tile works still employ a few residents, and light engineering works have been introduced within recent years ; but the majority of the inhabitants relies on farming, fruit growing and market gardening for a livelihood. Improved transport facilities and the demand for higher wages have induced others to seek employment in the factories, dockyards and business premises in the neighbouring towns of Eastleigh, Southampton and the city of Portsmouth.

Water.

Piped water is supplied to only twelve of the parishes within the district ; the residents of the other five parishes rely on wells, private bore holes and stored rain water. It is hoped, however, that the scheme at present under consideration will enable the vast majority of premises, relying on these sources, to connect to a main supply.

Drainage and Sewage.

There are no sewage works in the district, with the exception of the small disposal units on the new housing sites. Drainage of W.Cs. and waste water is by means of the conservancy system and the Council have inaugurated a scheme to provide four free emptyings of cesspools per year throughout their area, with a charge of 25/- for every emptying in excess of that number.

VITAL STATISTICS.

Births.		Male.	Female.	Total.
Live Births (Legitimate)	...	153	143	296
(Illegitimate)	...	9	11	20
				316

Live Birth rate per 1,000 of the estimated population (mid-1950) was 16·1 compared with 15·8 for the whole of England and Wales.

		Male.	Female.	Total.
Still Births (Legitimate)	...	1	1	2
(Illegitimate)	...	1	—	1
				3

Still Birth rate per 1,000 total (live and still) births was 9·4 compared with 22·6 for the whole of England and Wales.

Deaths.		Male.	Female.	Total.
From all causes	...	128	119	247

Death rate per 1,000 estimated average population was 12·0 compared with 11·6 for the whole of England and Wales.

Maternal Mortality.

Pregnancy, childbirth, abortion	...	...	Nil
<i>Maternal Mortality rate</i> per 1,000 total (live and still) births, 0·0.			

Infant Mortality (deaths under one year).

		Male.	Female.	Total.
Legitimate	...	3	1	4
Illegitimate	...	2	—	2
				6

Infant Mortality rate per 1,000 live births was 18·98 compared with 29·8 for the whole of England and Wales.

The number of deaths of infants under the age of one year, per 1,000 live births, is known as the infant mortality rate for that year.

This rate for each calendar year is not regarded as a reliable guide, for the number of births in the District is insufficient to be of significance statistically.

But, if this rate is taken over a period of five years, it is then considered reasonably reliable and one of the best indices of the social circumstances of the district. High rates are commonly associated with such problems as overcrowding and defective sanitation.

It is therefore satisfactory to report that, during the past fifteen years, the quinquennial rates for this District have been consistently lower than the figures for the country as a whole.

The following table shows the rate for the District as compared with the rate for England and Wales, each over a five-year period :—

Infant Mortality Rates (per 1,000 Live Births).				
Year.		Droxford Rural District.		England and Wales.
1934	...	49·3	...	60·8
1935	...	49·6	...	59·4
1936	...	54·0	...	57·2
1937	...	47·1	...	55·4
1938	...	50·8	...	55·2
1939	...	52·2	...	55·4
1940	...	52·1	...	53·6
1941	...	46·7	...	52·8
1942	...	47·1	...	52·0
1943	...	42·5	...	50·0
1944	...	33·2	...	46·0
1945	...	28·3	...	45·0
1946	...	28·5	...	42·0
1947	...	28·5	...	39·2
1948	...	26·3	...	35·9

The infant mortality rate for the year under review was 18·98 compared with 29·8 for the whole of England and Wales. It is gratifying to be able to state that this is almost equal to the lowest recorded figure for the district.

In 1949, the rate for the district was 38·7 compared with 32·0 for the country as a whole.

Causes of Death.

	MALE.	FEMALE.	TOTAL.
1. Tuberculosis of Respiratory System ...	—	—	—
2. Other forms of Tuberculosis ...	1	—	1
3. Syphilis ...	2	1	3
4. Diphtheria ...	—	—	—
5. Whooping Cough ...	—	—	—
6. Meningococcal Infections ...	—	—	—
7. Acute Poliomyelitis ...	—	—	—
8. Measles ...	—	—	—
9. Other Infective and Parasitic Diseases ...	1	1	2
10. Malignant Neoplasm, Stomach ...	4	1	5
11. " " Lung, Bronchus ...	4	1	5
12. " " Breast ...	—	4	4
13. " " Uterus ...	—	5	5
14. Other Malignant & Lymphatic Neoplasms	14	10	24
15. Leukæmia, Aleukæmia ...	—	1	1
16. Diabetes ...	1	1	2
17. Vascular Lesions of Nervous System ...	14	26	40
18. Coronary Disease, Angina ...	19	2	21
19. Hypertension with Heart Disease ...	1	3	4
20. Other Heart Disease ...	34	36	70
21. Other Circulatory Disease ...	4	1	5
22. Influenza ...	—	1	1
23. Pneumonia ...	4	2	6
24. Bronchitis ...	4	4	8
25. Other Diseases of Respiratory System ...	1	—	1
26. Ulcer of Stomach and Duodenum ...	1	1	2
27. Gastritis, Enteritis and Diarrhœa ...	—	1	1
28. Nephritis and Nephrosis ...	1	1	2
29. Hyperplasia of Prostate ...	1	—	1
30. Pregnancy, Childbirth, Abortion ...	—	—	—
31. Congenital Malformations ...	2	—	2
32. Other Defined and Ill-defined Diseases ...	8	14	22
33. Motor Vehicle Accidents ...	—	1	1
34. All other Accidents ...	5	1	6
35. Suicide ...	2	—	2
36. Homicide and Operations of War ...	—	—	—
	<u>128</u>	<u>119</u>	<u>247</u>

Causes of Death.

AGE GROUPS.

	0-1		1-2		2-3		3-10		10-15		15-20		20-35		35-45		45-55		55-65		65-75		75-85		85-95		95-100		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Tuberculosis, other than respiratory ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Syphilitic Disease ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	-	-	-	-	-	2
Other Infective and Parasitic Diseases	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	1
Malignant Neoplasm, Stomach ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2	-	1	-	-	-	-	4
" Lung, Bronchus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	2	-	-	-	-	-	-	-	-	4
" Breast	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	1	-	-	-	-	-	-	-	-
" Uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	1	-	-	-	-	-	-	-	-
Other Malignant & Lymphatic Neoplasms	-	-	-	-	-	1	-	-	-	-	-	-	2	-	1	1	1	1	1	7	1	2	6	1	-	-	-	14	
Leukæmia, Aleukæmia ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-
Diabetes ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Vascular Lesions of Nervous System ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	9	5	5	7	2	5	-	-	-	14
Coronary Disease, Angina ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5	-	-	1	-	3	1	7	1	2	-	1	-	19
Hypertension with Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	2	-	-	-	-	1
Other Heart Disease ...	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	2	1	7	3	8	5	13	16	3	11	-	-	-	34
Other Circulatory Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	1	-	1	1	-	-	-	-	-	4
Influenza ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-
Pneumonia ...	1	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1	-	1	1	-	1	-	-	-	-	-	-	4
Bronchitis ...	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	4	-	-	-	-	-	4
Other Diseases of Respiratory System	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Ulcer of Stomach and Duodenum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	1
Gastritis, Enteritis, Diarrhœa	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-
Nephritis and Nephrosis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	1
Hyperplasia of Prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Congenital Malformations ...	1	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Other Defined and Ill-defined Diseases	2	1	-	-	-	-	1	-	-	-	-	-	2	-	-	-	-	1	2	3	1	2	3	-	3	-	1	-	8
Motor Accidents ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-
Other Accidents ...	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	-	1	-	1	-	1	-	-	1	-	-	-	5
Suicide ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	-	-	-	2
TOTAL	5	1	1	-	-	1	2	1	-	-	2	-	2	3	1	10	5	19	24	35	21	40	40	10	22	1	1	128	

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

Public Health Officers of the Authority.

Medical Officer of Health :

S. CHALMERS PARRY, M.A. Cantab., M.R.C.S., L.R.C.P., D.P.H.

Engineer, Surveyor and Chief Sanitary Inspector :

F. LINDLEY, M.R.S.I., A.M.I.S.E., M.S.I.A.

Additional Sanitary Inspectors :

H. W. POTTER, A.R.S.I.

H. L. WENDEN, A.R.S.I., M.S.I.A.

Laboratory Facilities.

Bacteriological work is carried out by the Public Health Laboratory at the Royal Hampshire County Hospital, Winchester (Telephone, Winchester 3807) and specimens of clinical materials (sputum, swabs, etc.) and samples of water, milk and foodstuffs are sent for bacteriological examination to Dr. R. Mackenzie, Director of the Public Health Laboratory.

Some specimens in connection with cases of infectious diseases, which have been admitted to the Portsmouth Infectious Diseases Hospital, are sent for bacteriological examination to Dr. K. Hughes, Director of the Central Laboratory, Milton, Portsmouth (Telephone, Portsmouth 74785).

Samples of water, sewage, milk, etc., for chemical analyses are sent to the Public Analyst, Civic Centre, Southampton (Telephone, Southampton 3855).

Ambulance Facilities.

All applications for the use of ambulances should now be directed to the Ambulance Officer, Fareham (Telephone, Fareham 2170) who arranges for the most conveniently situated ambulance to attend.

Arrangements for the removal of smallpox cases (suspected or confirmed) are dealt with by the Aldershot Ambulance Station (Telephone, Aldershot 299), but applications should be made through the Ambulance Officer at Fareham.

General.

HOSPITALS.

There are no General Hospitals within the district, but the following hospitals are available :—

THE ROYAL SOUTH HANTS HOSPITAL, SOUTHAMPTON.
(Telephone, Southampton 2620).

CHILDREN'S HOSPITAL, SOUTHAMPTON.
(Telephone, Southampton 73924).

THE ROYAL PORTSMOUTH HOSPITAL, PORTSMOUTH.
(Telephone, Portsmouth 2103).

ST. MARY'S HOSPITAL, PORTSMOUTH.
(Telephone, Portsmouth 2476).

THE ROYAL HAMPSHIRE COUNTY HOSPITAL, WINCHESTER.
(Telephone, Winchester 2345).

Knowle Hospital, situated at Knowle in the parish of Wickham, is administered by the Regional Hospital Board, Portsmouth.

Waltham House, Droxford (Telephone, Droxford 45) which provides accomodation for old people from all parts of the county, is under the control of the County Council.

Infectious Diseases.

There is no infectious diseases hospital in the district.

Any Infectious Diseases Hospital is now available for the admission of cases occurring in the district. Patients are generally admitted to Portsmouth Infectious Diseases Hospital, Milton Road (Telephone, Portsmouth 2046), which is under the control of the Regional Hospital Board.

Special arrangements have been made for the admission of children suffering from acute polio-myelitis to Lord Mayor Treloar Hospital, Alton (Telephone, Alton 2238).

Sanatoria.

Sanatoria for patients, who are suffering from Tuberculosis, are provided by the Regional Hospital Board.

Smallpox.

The Regional Hospital Board makes provision for the treatment of cases of smallpox at Crabwood Smallpox Hospital. The County Medical Officer arranges for the admission of the patients.

Nursing in the Home.

The names of District Nurses, Midwives and Health Visitors, who practise in the district under the direction of the County Medical Officer, are shown in the following table :—

Names and Addresses of Nurses.	District served.	Names of Health Visitors.
MISS A. L. BROWN, S.C.M., 18 Penfords Paddock, Bishop's Waltham. (Tel. : Bishop's Waltham 199).	Part of Bishop's Waltham	MISS E. J. READ, S.R.N., S.C.M., A.R.San.I., R.S.I. Certificate.
MRS. A. BEAKE, S.R.N., S.C.M., 14 Folly Field, Bishop's Waltham. (Tel. : Bishop's Waltham 330).	Part of Bishop's Waltham and Upham.	
MISS M. C. VINCENT, S.R.N., S.C.M., 32 Meon Park, Wickham. (Telephone : Wickham 2277).	Shedfield. Wickham, parts of Southwick and Boarhunt.	MISS F. R. BACK, S.R.N., S.C.M., R.S.I. Certificate.
MISS A. L. BROWN, S.C.M., 18 Penfords Paddock, Bishop's Waltham. (Tel. : Bishop's Waltham 199).	Swanmore.	
MISS N. SWAIN, S.C.M., 1 Stewarts Green, Hambledon. (Telephone : Hambledon 49).	Denmead. Hambledon.	
MISS S. REID, S.C.M., Nightingale Bungalow, Soberton. (Telephone : Wickham 3182).	Parts of Southwick and Boarhunt. Soberton. Droxford, Cor- hampton, Meon- stoke, Exton.	
MISS E. F. MOORE, S.C.M., The Vicarage, East Meon. (Telephone : East Meon 63).	Warnford. West Meon.	MRS. C. E. FOSTER, S.R.N., S.C.M., A.R.San.I., R.S.I. Certificate.
MISS K. BRABROOK, S.R.N., S.C.M., The Crest, Widley. (Tel. : Cosham 75477).	Widley.	MISS B. G. OSBORN, S.R.N., S.C.M., R.S.I. Certificate, Orthopædic Nursing Certificate.
MISS B. F. CHILD, S.R.N., 41 London Road, Widley. (Tel. : Cosham 75315).		
MRS. A. BEAKE, S.R.N., S.C.M., 14 Folly Field, Bishop's Waltham. (Tel. : Bishop's Waltham 330).	Durley.	MISS P. JENKINS, S.R.N., S.C.M., R.S.I. Certificate.
MISS D. STOYELL, S.C.M., Leehurst, Botley. (Tel. : Botley 15).	Curbridge. Curdrige.	

Child Welfare Centres.

The following Child Welfare Centres in the Rural District are open for children under five years of age :—

Centre.	Hall.	Afternoons.
Bishop's Waltham ...	Youth Club ...	1st and 3rd Fridays.
Denmead ..	Free Church Room ...	4th Mondays.
Droxford ..	Village Hall ...	1st Mondays.
Hambledon ...	Women's Institute ...	2nd Mondays.
Shedfield ...	Chase Hut, Waltham Chase ...	2nd and 4th Wednesdays.
Southwick ...	Manor Hall ...	4th Fridays.
Swanmore ...	Parish Hall ...	3rd Thursdays.
Wickham ...	Church Hall ...	1st and 3rd Wednesdays.

The following three centres, situated in adjoining districts, are available for children living near the boundaries of the district :—

Centre.	Hall.	Afternoons.
Fair Oak ...	Women's Hall ...	2nd and 4th Thursdays.
Sarisbury ...	British Legion Hall ...	1st and 3rd Thursdays.
Titchfield ...	Parish Hall ...	1st and 3rd Mondays.

The work of the voluntary helpers, who assist the medical and nursing staff at the Welfare Centres, is greatly appreciated.

***Tuberculosis Clinics.**

The following Chest Clinics are available to patients suffering from Tuberculosis.

FAREHAM.—The Chest Clinic, St. Christopher's Hospital.

Old patients	By appointment.
New patients	Every Wednesday at 12 noon.
A.P. refills	Every Wednesday at 3 p.m.
Evening Clinic	Second Wednesday at 5 p.m. By appointment from Chest Physician (Tel. : Fareham 226311).

HAVANT.—County Council Health Centre, Park Way.

Old patients	By appointment from Chest Physician. (Tel. : Havant 716).
New patients	Every Thursday at 12 noon.
A.P. refills	Every Thursday at 2 p.m.

WINCHESTER.—County Medical Department, Trafalgar Street.

Old patients	By appointment from Chest Physician. (Tel. : Winchester 4411, ext. 132).
New patients	Every Wednesday at 2.30 p.m.
A.P. refills	Every Wednesday at 1.30 p.m.

EASTLEIGH.—The Mount Sanatorium, Bishopstoke.

Old patients	Every Tuesday and Friday, by appointment.
New patients	Every Tuesday at 2 p.m.
A.P. refills	Every Wednesday at 10 a.m.
Evening Clinic	First Tuesday at 5 p.m. By appointment from Chest Physician (Tel. : Eastleigh 87235).

*Venereal Diseases.

Treatment is available at the following clinics :—

PORTSMOUTH—St. Mary's Hospital.

Males : 10 a.m. to 7 p.m., Tuesdays and Thursdays.

Females : 5 to 7 p.m., Mondays. 2 p.m., Wednesdays.
10 a.m., Fridays.

SOUTHAMPTON—1 Cardigan Road.

Males : 10–12 a.m. and 5–7 p.m., Monday, Tuesday,
Wednesday, Thursday and Friday.

SOUTHAMPTON—Kings Park Road.

Females : 10 a.m., Monday. 2 p.m., Tuesday.
3 p.m., Thursday. 2 p.m., Friday.

SOUTHAMPTON—Berth 41, Old Docks.

Males : 9–10 a.m., Monday to Friday.

SOUTHAMPTON—Berth 106, New Docks.

Males : 4–5 p.m., Monday to Friday.

WINCHESTER—Royal Hants County Hospital.

Males : 10 a.m. Saturday.

Females : 2.30 p.m., Tuesday.

SCHOOL HEALTH SERVICES.

*Orthopædic Clinics.

Orthopædic patients, requiring treatment, are referred—through the Lord Mayor Treloar's Hospital, Alton—to the following Clinics :—

Winchester. *Minor Clinic*, held at Trafalgar House, on fourth Fridays on odd months, at 2 p.m.

Fareham. *Remedial Clinic*, held at Methodist Hall, on Mondays and Thursdays, 9.30 a.m. to 3 p.m.

Havant. *Surgeon's Clinic*, held at County Council Health Centre on fourth Tuesdays, even months, at 10 a.m.

Minor Clinic, held at County Council Health Centre on second and fourth Wednesdays, odd months, at 10 a.m.

Remedial Clinic, held at County Council Health Centre every Wednesday at 10 a.m. and 1.30 p.m.

Petersfield. *Remedial Clinic*, held at County Council Health Centre, Ramshill, first Tuesday, at 10 a.m., other Tuesdays at 1.30 p.m.

***Ophthalmic Clinics.**

These are available, *by appointment* through the County Medical Officer, at the following places :—

- Winchester. Held at Trafalgar House on first and second Thursday in afternoon and the fourth Thursday at 9.30 a.m. and 2 p.m.
- Havant. Held at County Council Health Centre, Park Way, on first Mondays at 9.30 a.m. to 3 p.m.
- Fareham. Held at Methodist Hall on first Tuesdays at 9.30 a.m. to 3 p.m. and first and third Thursdays at 9.30 a.m.
- Petersfield. Held at County Council Health Centre, Ramshill, on the third Mondays at 9.30 a.m. to 3 p.m.

***Orthoptic Clinic.**

Cases, selected by the School Oculist, are referred to the Eye and Ear Hospital, Portsmouth.

Ear, Nose and Throat Clinics.

Cases, referred for specialist advice, are examined either at the Portsmouth Eye and Ear Hospital or Winchester Royal Hants County Hospital, and treatment is carried out there or at Petersfield Hospital.

Speech Therapy Clinics.

Cases attend *by appointment* at the following centres :—

- Winchester. County Council Health Centre, every Monday and Friday at 9.30 a.m. and 1.30 p.m.
- Fareham. St. John's Ambulance Hut, every Tuesday and Friday at 9.30 a.m. to 3 p.m.
- Havant. County Council Health Centre on Wednesdays at 2 p.m.

Child Guidance Clinics.

Cases are seen, *by appointment*, at Trafalgar House, Winchester.

Verminous Cleansing Clinics.

A Cleansing Centre is available at the Holy Trinity Church House, Fareham, every Friday at 9.30 a.m. to 12 noon.

Three other Cleansing Centres are also available :—

Havant. Potash Terrace, alternate Fridays at 9.30 a.m.
(Tel. : 716).

Eastleigh. County Council Health Centre, Red House, every
(Tel. : 847981). Friday at 9.30 a.m.

Petersfield. County Council Health Centre, Ramshill, every
Friday at 9.30 a.m.

Dental Clinic.

These are held when required at :—

The Child Welfare Rooms, Ramshill, Petersfield.

County Council Health Centre, Park Way, Havant.

4 The Square, Winchester.

Also at other premises and schools as and when required.

** These services are the responsibility of the Regional Hospital Board.*

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Notifiable Diseases.

Particulars of cases of Infectious Diseases, which were notified during the year and comparative notification rates for the whole of England and Wales, are shown in the following table :—

Diseases.	Total Cases Notified.	Rate per 1,000 of the Population.	
		Droxford R.D.	England & Wales.
Pneumonia ...	9	0·46	0·70
Scarlet Fever ...	14	0·71	1·50
Paratyphoid " B " ...	1	0·05	0·01
Poliomyelitis (Paralytic) ...	3	0·15	0·13
Erysipelas ...	1	0·05	0·17
Measles ...	21	1·07	8·39
Whooping Cough ...	56	2·86	3·60

Only certain forms of Pneumonia are notifiable.

An analysis of the total notified cases according to age groups is given below :—

Age Group.	Pneu- monia.	Scarlet Fever.	Para- typhoid "B."	Polio- myelitis (Paralytic).	Erysip- elas.	Measles	Whooping Cough.
Under 1 yr.	—	—	—	—	—	2	2
1 - 2 yrs.	—	—	—	—	—	2	11
2 - 3 "	—	—	—	—	—	1	8
3 - 4 "	—	—	—	1	—	2	11
4 - 5 "	—	—	—	—	—	2	4
5 - 10 "	1	10	—	1	—	12	17
10 - 15 "	—	2	1	—	—	—	1
15 - 20 "	—	—	—	—	—	—	—
20 - 35 "	—	1	—	—	—	—	1
35 - 45 "	—	—	—	—	—	—	1
45 - 65 "	4	1	—	1	1	—	—
Over 65 "	4	—	—	—	—	—	—
TOTALS ...	9	14	1	3	1	21	56

The following table shows the number of cases of infectious disease, notified during the year, and the parishes in which they occurred :—

Parish.	Pneu- monia.	Scarlet Fever.	Para- typhoid "B."	Polio- myelitis (Paralytic).	Erysip- elas.	Measles.	Whooping Cough.
Bishop's Waltham ...	1	2	...	1	...	...	5
Boarhunt ...	...	...	...	...	...	2	...
Corhampton & Meonstoke	...	...	...	...	...	...	...
Curbridge ...	2	...	...	...	...	...	1
Curdrige ...	...	1	...	...	...	...	5
Denmead ...	...	1	...	...	...	6	28
Durley ...	...	...	...	...	...	...	...
Droxford ...	...	...	...	...	...	...	...
Exton	...	...	...	...	...	...	2
Hambledon	...	1	...	...	...	6	1
Shedfield ...	...	...	...	...	...	...	3
Soberton ...	...	...	...	...	...	1	1
Southwick & Widley ...	...	1	...	...	...	1	2
Swanmore ...	...	...	...	1	...	...	2
Upham ...	...	...	...	1	...	...	...
Warnford ...	...	...	...	...	...	1	...
West Meon	...	...	...	...	...	...	...
Wickham ...	6	8	1	...	1	4	6
TOTALS ...	9	14	1	3	1	21	56

TUBERCULOSIS.

At the end of the year, the total number of cases on the register was one hundred and two.

The following table gives the number of cases of Tuberculosis registered in the district at the beginning and end of 1950.

	<i>Respiratory.</i>			<i>Non-Respiratory.</i>		
	<i>M.</i>	<i>F.</i>	<i>Total.</i>	<i>M.</i>	<i>F.</i>	<i>Total.</i>
Number on Register at the beginning of the year (1950)	39	20	59	16	11	27
New additions to the Register during the year	9	6	15	2	5	7
Removals from the Register during the year	2	4	6	—	—	—
Number on Register at the end of the year (1950)	46	22	68	18	16	34

Analysis of new cases and deaths according to age groups :—

<i>Age Period.</i>	<i>New Cases.</i>				<i>Deaths.</i>			
	<i>Respiratory.</i>		<i>Non-Respiratory.</i>		<i>Respiratory.</i>		<i>Non-Respiratory.</i>	
	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>	<i>M.</i>	<i>F.</i>
0 - 1	—	—	—	—	—	—	—	—
1 - 5	—	1	1	—	—	—	—	—
5 - 15	—	—	—	2	—	—	—	—
15 - 25	2	1	—	—	—	—	—	—
25 - 35	3	2	—	1	—	—	—	—
35 - 45	1	—	1	1	—	—	—	—
45 - 55	1	1	—	—	1	1	—	—
55 - 65	1	—	—	—	—	—	—	—
65 and over	—	1	—	1	—	—	—	—
Age unknown	1	—	—	—	—	—	—	—
TOTAL	9	6	2	5	1	1	—	—

Food Infection.

It is satisfactory to report that no case of food poisoning was notified in this district, although numerous outbreaks were recorded throughout the country. These outbreaks are almost entirely due to the lack of cleanliness amongst the personnel of food premises.

The two types of germ, that can thrive in the human body and are mainly responsible for cases of food poisoning, are the *Staphylococcus* and the *Salmonella* organisms. The *Staphylococcus* is present in the nose, throat and skin and in septic sores. The *Salmonella* is usually found in the bowels; and, as some people may harbour the germ without being ill, food may easily be infected if such a "carrier" happens to be a food handler.

The washing of hands immediately after using the lavatory is an essential precaution, as toilet paper is porous.

The remedy in both cases is personal cleanliness and, above all, clean hands.

Any employee, infected with diarrhoea or with septic sores or boils, should not be allowed to handle food.

It should constantly be borne in mind by all concerned in the handling, preparation, and storage of food—and particularly by those who work in canteens or who serve food to large numbers—that the utmost care must be taken to obviate the risk of food poisoning. This may occur, even in the best equipped of canteens, and prevention is largely dependent on personal hygiene. The food itself will probably appear to be all right; but, even so, it can still act as a vehicle for the transmission of infection.

Certain foods (e.g. pressed meat, brawn, meat pies, stews, trifles, custards and synthetic cream) are normally quite safe when prepared; but act as ideal breeding grounds for any dangerous germs that gain access—especially if kept at warm temperatures.

Although refrigeration does not actually kill the organisms, it definitely retards their growth; and it is most important that these vulnerable foods are stored at a low temperature to prevent the germs from multiplying.

Vaccination.

Persons, who travel from infected areas to this country *by sea* (with the exception of those coming by one of the short sea routes) have usually passed the incubation period of smallpox before arrival in England.

Whereas those, who travel *by air*, arrive in this country before the incubation period of smallpox has elapsed, so there is greater risk that a case might land here before the disease has become apparent.

From time to time, outbreaks arise from cases that develop after landing ; and, in order to counteract this increased risk of infection, it is all the more important that primary vaccination in infancy and periodic re-vaccination should be carried out.

The ideal time for the first vaccination is during the first six months of infancy—preferably about the fourth month.

Children should be re-vaccinated before the age of ten years—preferably between seven and ten years—and on subsequent occasions if there has been exposure to smallpox.

The following is an extract from the latest report of the Chief Medical Officer to the Ministry of Health :—

“ While parents appear to have become more casual about the need for *infant* vaccination, now that the element of compulsion has been removed ; its popularity—as an emergency measure in an outbreak of smallpox—has been well demonstrated in recent outbreaks.

Vaccination and other measures, used locally, were fortunately effective to deal promptly with these dangerous situations ; but this is not a sufficient argument in favour of delaying primary vaccination from infancy until a later age or until the individual has almost certainly been exposed to the infection of smallpox.

To delay the first vaccination from infancy until a later age is contrary to the best interests of the individual who is thus denied the opportunity of acquiring, with minimum risk, an initial immunity to smallpox, that can be effectively revived with little inconvenience should the necessity arise later.

This conception of routine infant vaccination as a procedure, which provides an essential foundation on which a solid immunity to smallpox can be rapidly and safely built up by further vaccination in emergency, is not enough appreciated by parents.”

Diphtheria Immunisation.

During the year, two hundred and sixty-one immunisations against diphtheria were carried out.

<i>Immunisation.</i>	<i>Pre-school Children.</i>	<i>School Children.</i>
Primary ...	185	22
Re-inforcing or "Boosters"	—	54
TOTAL ...	185	76

At the end of the year the percentage of immunised children under the age of fifteen years was 84·2 compared with a corresponding figure of 65·7 for the country as a whole in 1949.

Practically all the diphtheria immunisation work is carried out by general practitioners ; and a figure of 84·2% for immunised children is one of which they may well be proud—especially in a rural district.

A tribute is also due to the parents who have wisely given their consents.

The following table gives the annual incidence and mortality from diphtheria since 1933 :—

	1933	1934	1935	1936	1937	1938	1939	1940	1941
Cases ...	22	3	2	3	5	3	7	4	3
Deaths ...	2	1	—	—	—	—	—	—	—
	1942	1943	1944	1945	1946	1947	1948	1949	1950
Cases ...	—	4	1	2	1	—	—	—	—
Deaths ...	—	—	—	—	—	—	—	—	—

It is satisfactory to record that there have been no deaths from diphtheria since the scheme for diphtheria immunisation by general practitioners in this district was commenced in 1935.

It is also noted that there has been no case for four consecutive years.

Diphtheria Immunisation Propaganda.

The Ministry of Health recommends that all children should be immunised before their first birthday—preferably at the age of seven or eight months and that they should receive their first “booster” or re-inforcing dose just before entering school, and again every four or five years throughout school life.

In order that protection against epidemic diphtheria can reasonably be assured, the proportion of people immunised against diphtheria should be kept up to the 75% level.

The danger now is that, owing to the decreased demand for immunisation, the proportion of protected persons may drop to a level at which the population of a few unfortunate towns or even of areas of the country would be vulnerable to diphtheria.

Owing to the fact that immunity against diphtheria takes several weeks to develop, those that have been inoculated earlier in life will have the advantage of receiving protection against diphtheria at short notice.

It is, therefore, of the utmost importance for parents to realise that active immunisation in the first year of life and re-inforcing doses of prophylactic in later years are just as necessary in the *absence* of diphtheria epidemics as in their presence.

Scabies.

Facilities for the treatment of Scabies are available at Havant and Portsmouth Disinfestation Clinics.

Appointments for cases requiring treatment are made through this Department.

Scabies should be regarded as a family infection; and all members of the same family should present themselves for treatment simultaneously—whether or not they complain of “The Itch” and show evidence of Scabies at the time. Otherwise an early case may escape detection and the parasite may thrive in one member and re-infect the others.

Pediculosis.

Cases of Pediculosis (head lice) may be referred for treatment on Fridays at any of the following Cleansing Clinics :—

Fareham,
Havant,
Eastleigh,
Petersfield,

whichever is the most convenient.

Pediculosis should also be regarded as a family infection ; and, when a child is found to be verminous, all the members of the family should offer themselves for examination. This wise practice would ensure that any undetected case in the same family would receive immediate treatment and that there would be no further spread of infection to others.

NATIONAL ASSISTANCE ACT, 1948.

It is satisfactory to report that no official action was taken under Section 47 of the National Assistance Act, 1948, during the year in connection with the removal to hospital of persons who, owing to grave chronic disease, or being aged, infirm or physically incapacitated and living in insanitary conditions, were unable to devote to themselves and were not receiving from other persons proper care and attention.

Two cases, that were brought to the notice of this department, were investigated, but these were referred to the Area Welfare Officer who finally persuaded them to be admitted voluntarily.

The assistance, given by the Welfare Officer, Sanitary Inspectors, Health Visitors and voluntary organisations, is greatly appreciated in these difficult and distressing cases.

REPORT OF THE SURVEYOR AND CHIEF SANITARY INSPECTOR.

SANITARY CIRCUMSTANCES OF THE AREA.

Water Supply.

Twelve Parishes are supplied with a piped supply of water, chiefly by statutory water undertakings within whose area of supply the Parishes are situate, as follows :—

GOSPORT WATERWORKS COMPANY	...	Bishop's Waltham, Boarhunt, Shedfield, Swanmore, Wickham.
PORTSMOUTH WATER COMPANY	...	Denmead, Hambledon, Southwick and Widley.
SOUTHAMPTON CORPORATION	...	Curbridge, Curdridge, Durley.
DROXFORD R.D.C.	...	West Meon.

During the year a 6" main was laid to the village of Southwick by the Portsmouth Water Company. This main will eventually supply the whole village which is at present served by the estate's private supply.

Additional mains were laid in Wickham on the Council's new housing estate.

MEON VALLEY WATER SCHEME.

This scheme has moved a stage nearer fruition as the public enquiry was held in July. The Inspector also dealt with the Council's application in respect of the Upham Water Scheme.

Frequent samples of water are taken by the Statutory Undertakers and also in respect of the Council's undertaking at West Meon.

In each case the results were very satisfactory.

Drainage and Sewerage.

Certain sewer ditches in the parishes of Bishop's Waltham and Wickham are cleansed periodically by the Council.

Public Cleansing.

The collection of night soil has been maintained throughout the district although this scheme is not fully comprehensive in certain outlying parishes. Cesspools are also emptied throughout the district, allowance being made for four free emptyings per annum.

The following summary gives particulars of work done during the year under review :—

<i>Cesspools emptied.</i>	<i>E.Cs. emptied.</i>
2,386	112,514

Household refuse is collected throughout the district twice monthly whilst Bishop's Waltham, Shedfield and Wickham have a weekly collection. This is done by direct labour and I estimate that 233,423 dustbins or receptacles have been emptied during the year.

Salvage.

During the year, the collection of salvage practically ceased owing to the inability of selling waste paper, but the following amounts were collected and disposed of :—

Waste Paper	...	1 ton	1 cwt.
Steel	...		3 cwt.
Cast Iron	...	9 tons	10 cwt.
Light Iron	...	3 tons	11 cwt.
Mixed Metal	...		5 $\frac{3}{4}$ cwt.
Rags	...	2 tons	2 cwt.
Sacking	...		6 $\frac{1}{4}$ cwt.
String	...		$\frac{1}{4}$ cwt.
Bones	...		1 cwt.

Salvage is collected concurrently with refuse. The total receipts were £80[—]8s. 5d.

HOUSING STATISTICS (PUBLIC HEALTH)

Inspection of Dwelling-houses during the year—

(1) (a)	Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	48
(b)	Number of inspections made for the purpose	423
(2) (a)	Number of dwelling-houses (included under sub-head [1] above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ...	23
(b)	Number of inspections made for the purpose	268
(3)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ...	7
(4)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be, in all respects, reasonably fit for human habitation ...	16

Remedy of Defects during the year without service of Formal Notices—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ...	14
---	----

Action under Statutory Powers during the year—

(a)	Proceeding under Sections 9, 10 and 16 of the Housing Act, 1936—	
(1)	Number of dwelling-houses in respect of which Notices were served requiring repairs	13
(2)	Number of dwelling-houses which were rendered fit after service of formal notices—	
(a)	By owners	16
(b)	By Local Authority in default of owners	Nil

(b) Proceedings under Public Health Acts—			
(1)	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ...	...	17
(2)	Number of dwelling-houses in which defects were remedied after service of formal notices—		
	(a) By owners ...	...	37
	(b) By Local Authority in default of owners ...	...	Nil
(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936—			
(1)	Number of dwelling-houses in respect of which Demolition Orders were made		8
(2)	Number of dwelling-houses demolished in pursuance of Demolition Orders ...		2
(3)	Undertakings given ...	...	4

Overcrowding.

Statutory overcrowding does exist in a minor degree within the area, but under existing circumstances no direct action is taken, cases being referred to the appropriate Committee for consideration when allocating new houses.

Hobhouse Survey.

The Hobhouse Survey was undertaken throughout the year in the following parishes :—

Bishop's Waltham	...	122
Swanmore	...	159

the total houses inspected being 281.

The provisional classification, as agreed upon by the County as a whole, is as follows :—

Category 1	...	51
" 2	...	98
" 3	...	57
" 4	...	37
" 5	...	38

The percentage of houses in Category 5, comprising houses which are unfit for human habitation and are incapable of repair at a reasonable expense is 13·523.

New Houses and Buildings.

Number of Plans approved during the year	...	225
„ Houses	... ..	30
„ Additions and Alterations	...	67
„ Conversion and Adaptations	...	7
„ Garages	... ..	36
„ Bathrooms and Drainage Installations		51
„ Farm Buildings	... ..	38
„ Sheds and Stores	... ..	9
„ Layouts	... ..	1
„ Houses erected by private enterprise during the year	... ..	18

During the year seventy-nine houses have been erected by the Council, making a total of four hundred and thirteen properties owned by the Council, plus six converted temporary dwellings at Wickham, and six at Curdridge.

At the end of the year forty-four Council houses were in course of construction.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply.

Supervisory control of distributors and retail dairy premises was maintained throughout the year and a general satisfactory standard was maintained.

There are eleven distributors on the Council's Register.

Licences issued under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949—

Dealers' Licences to use the designation " Pasteurised "	... ..	1
Supplementary Licences to use the designation " Pasteurised "	... ..	5

Licences issued under the Milk (Special Designation) (Raw Milk) Regulations, 1949—

Dealers' Licences to use the designation " Tuberculin Tested "	... ..	2
Supplementary Licences to use the designation " Tuberculin Tested "	... ..	5

Meat Inspection.

Although no Ministry of Food slaughter-house exists within the district, the following animals were slaughtered under licence by the Local Food Office and the carcasses inspected by the department.

Pigs	...	...	41
------	-----	-----	----

Other Foods.

Fifteen visits were made to food shops and warehouses within the area for the purpose of examination of tinned foods and other commodities, and voluntary surrender certificates issued as required.

The total weights of butchers' meat, tinned food and other commodities condemned during the year were :—

Butcher's Meat	...	...	455 lbs.
Tinned Foods	...	...	326 lbs. 3 ozs.
Other Commodities	...	...	66 lbs. 10 ozs.
Total Weight			847 lbs. 13 ozs.

It will be noticed that quite a large amount of butcher's meat was found to be unfit for human consumption and was returned to the Ministry of Food by the usual channels.

Although improvements have been carried out at the local Meat Distribution Dépôt at Bishop's Waltham, the methods of transport and the condition of home-killed meat as it leaves the slaughter-house leave much to be desired.

It is hoped that matters will greatly improve on completion of the model slaughter-house now in course of construction at Fareham.

Food Premises.

The Byelaws under Section 15 of the Food and Drugs Act, 1938 for securing the observance of sanitary and cleanly conditions and practices in connection with the handling, wrapping and delivery of food and sale of food in the open air, came into force on 17th July.

A copy of the Byelaws, together with an explanatory letter, was sent to all food traders in the district.

Inspections of the one-hundred and ninety-eight food shops and other establishments which prepare food for sale, were carried out during the year, and, taking into consideration the type of construction of many of the premises and the lack of main water and drainage in several of the parishes, it was found that the general conditions prevailing throughout the Rural District were satisfactory.

Forty-five visits were made to premises registered under Section 14 of the Food and Drugs Act, 1938.

Food Adulteration.

This section of the Food and Drugs Act, 1938 is operated by the County Council.

Details of samples taken under the Food and Drugs Act, 1938 during the year ended 31st March, 1951 :—

Article.	No. Taken.	
	Genuine.	Not Genuine.
Butter and other Fats	7	—
Drugs 	2	—
Milk 	62	1
Sausage and other Meat Products 	3	—
Spirits 	3	—
Other Foods ...	15	—
	—	—
TOTALS 	92	1
	—	—

Two samples of milk, one taken just before and the other immediately after the end of the year in question, from a producer within the district, were certified to contain 15·2% and 4·5% of added water respectively.

Proceedings were taken and the cases were heard at Fareham, when the defendant was ordered to pay a fine of £20 in each case plus £10 6s. 0d. costs (total £50 6s. 0d.).

RODENT CONTROL.

The Prevention of Damage by Pests Act, 1949 came into force on the 31st March of this year.

The new Act places further duties on Local Authorities and additional responsibilities on occupiers of land. Local Authorities are required to acquaint themselves more fully with the circumstances in their districts with regard to rodent infestation and to carry out inspections and disinfection on broader lines than before.

Closer co-operation with the Agricultural Executive Committee is now necessary and has in fact been attained since the Act came into operation.

1. PREVALENCE OF RATS AND MICE.

		(i)	(ii)	(iii)	(iv)	(v)	(vi)	(vii)
		Number of properties in Local Authority's Area.					Analysis of Column iv.	
TYPE OF PROPERTY.	Total.	In which infestation was			Number infested by			
		Notified by Occupier.	Otherwise discovered.	Recorded total of (ii) and (iii)	*Rats.		Mice only.	
Local Authority's Property	4	—	2	2	—	2	—	
	5017	53	1061	1114	—	1114	—	
	256	8	—	8	—	8	—	
Agricultural Property	644	—	—	—	—	—	—	
TOTALS	5921	61	1063	1124	—	1124	—	

* Information regarding the extent of infestation in this table is based on records kept during the period of operation of the Prevention of Damage by Pests Act, 1949 from commencement of operation 31st March, 1950 to 31st December, 1950.

2. MEASURES OF CONTROL BY LOCAL AUTHORITY.

TYPE OF PROPERTY.	No. of properties inspected.	No. of inspections made.	Number of notices served under Section 4.		Number of treatments carried out.				Block treatments of properties in different occupancies under Section 6 (1) or by informal arrangement.			
					By arrangement with occupier.		Under Section 5 (1).					
			Treatments.	Works.	Rats.	Mice only.	Rats.	Mice on y.	Number of blocks.	Surface.	Associated sewers.	
Local Authority's Property	4	12	-	-	2	-	-	-	-	-	-	
Dwelling House ...	3164	4272	-	-	47	-	-	-	68	1061	-	
Business Premises ...	56	75	-	-	8	-	-	-	-	-	-	
Agricultural Property ...	-	-	-	-	-	-	-	-	-	-	-	
TOTAL ...	3227	4359	-	-	57	-	-	-	68	1061	-	

SUMMARY OF INSPECTIONS MADE AND NOTICES SERVED.

Building Inspections.

Foundations ...	...	...	...	47
Damp proof courses	...	...	...	28
Intermediate	...	...	...	231
Drains tested	...	...	...	144
Final inspections	...	...	...	46
Building licence and inquiries inspections	...	...	...	98
Short-lived materials, section 53	...	...	...	—
Council house inspections	...	...	...	378
Town planning inspections	...	...	...	10

Public Health Act, 1936.

Drains and sewer ditches controlled by the Council	...	...	...	22
Blocked and insanitary drains and cesspools	...	...	...	43
Defective and insanitary closet accommodation	...	...	...	1
Dangerous buildings	...	...	...	—
Refuse tips	...	...	...	10
Filthy and verminous premises	...	...	...	9
Verminous persons	...	...	...	2
Disinfestations	...	...	...	5
Nuisances (other than houses) section 92	...	...	...	8
Re-inspections	...	...	...	10
Water supply	...	...	...	474
Infectious diseases, visits	...	...	...	27
Disinfections	...	...	...	12
Moveable dwellings, section 269	...	...	...	45
Other inspections	...	...	...	114

Food and Drugs Act, 1938.

Carcases inspected	...	...	...	41
Inspections, other foods	...	...	...	15
Food premises, section 13	...	...	...	45
Milk and Dairies	...	...	...	4
Slaughter-houses and knacker's yards	...	...	...	14

Factorles Act, 1937.

Power Factories	...	...	...	1
Non-power factories	...	...	...	1
Outworkers	...	...	...	1

Petroleum Regulations.

Inspections	...	...	...	6
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Miscellaneous.

Shops (excluding food premises)	...	...	—
Rodent control (by sanitary inspector)	...	...	11
Housing applications	...	...	57
Other visits	...	...	203

Samples taken.

Water	...	...	...	...	66
Sewage	...	...	...	...	5
Milk	...	...	...	...	8
Ice Cream	...	...	...	...	2
Other samples	...	...	...	...	13

FACTORIES ACT, 1937.

Part 1 of the Act.

1. Inspections for purposes as to health.

Premises.	Number on Register.	Inspections.	Number of written Notices.
Factories with mechanical power ...	49	1	—
Factories without mechanical power	18	1	—
Other premises under the Act (in- cluding works of building and engineering construction, but not including outworkers' premises	—	15	—
TOTALS ...	67	17	—

